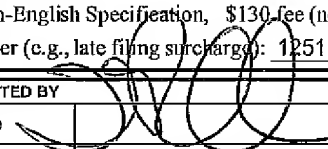


Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

|   |  |                          |                                |
|---|--|--------------------------|--------------------------------|
| <b>Effective on 12/08/2004.</b><br><b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b><br><b>FEE TRANSMITTAL</b><br><b>For FY 2008</b> |  | <b>Complete if Known</b> |                                |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |  | Application Number       | 09/708,081-Conf. #9588         |
|   |  | Filing Date              | November 8, 2000               |
|   |  | First Named Inventor     | Hiroshi TANAKA                 |
|   |  | Examiner Name            | G. V. Selby                    |
|   |  | Art Unit                 | 2622                           |
| <b>TOTAL AMOUNT OF PAYMENT</b>  |  | (\$ ) 120.00             | Attorney Docket No. 0879-0286P |

|  |  |
|--|--|
| <b>METHOD OF PAYMENT (check all that apply)</b>  |  |
| <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ |  |
| <input checked="" type="checkbox"/> Deposit Account            Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch &amp; Birch,</u>                        |  |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)   |  |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee  |  |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments             |  |

|   |                     |   |                      |                                  |                         |                              |                       |
|---|---------------------|---|----------------------|----------------------------------|-------------------------|------------------------------|-----------------------|
| <b>FEE CALCULATION</b>  |                     |   |                      |                                  |                         |                              |                       |
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>  |                     |   |                      |                                  |                         |                              |                       |
|   | <b>FILING FEES</b>  |   | <b>SEARCH FEES</b>   |                                  | <b>EXAMINATION FEES</b> |                              |                       |
| <b>Application Type</b>   | <b>Fee (\$)</b>     | <b>Small Entity Fee (\$)</b>                            | <b>Fee (\$)</b>      | <b>Small Entity Fee (\$)</b>     | <b>Fee (\$)</b>         | <b>Small Entity Fee (\$)</b> | <b>Fees Paid (\$)</b> |
| Utility   | 310                 | 155   | 510                  | 255                              | 210                     | 105                          |                       |
| Design  | 210                 | 105   | 100                  | 50                               | 130                     | 65                           |                       |
| Plant   | 210                 | 105   | 310                  | 155                              | 160                     | 80                           |                       |
| Reissue   | 310                 | 155   | 510                  | 255                              | 620                     | 310                          |                       |
| Provisional   | 210                 | 105   | 0                    | 0                                | 0                       | 0                            |                       |
| <b>2. EXCESS CLAIM FEES</b>   |                     |   |                      |                                  |                         |                              |                       |
|   |                     |   |                      |                                  |                         | <b>Small Entity</b>          |                       |
| <b>Fee Description</b>  |                     |   |                      |                                  |                         | <b>Fee (\$)</b>              | <b>Fee (\$)</b>       |
| Each claim over 20 (including Reissues)   |                     |   |                      |                                  |                         | 50                           | 25                    |
| Each independent claim over 3 (including Reissues)  |                     |   |                      |                                  |                         | 210                          | 105                   |
| Multiple dependent claims   |                     |   |                      |                                  |                         | 370                          | 185                   |
| <b>Total Claims</b>   | <b>Extra Claims</b> | <b>Fee (\$)</b>   | <b>Fee Paid (\$)</b> | <b>Multiple Dependent Claims</b> |                         |                              |                       |
| 11  | - 20 =              | x   | =                    | <b>Fee (\$)</b>                  | <b>Fee Paid (\$)</b>    |                              |                       |
| HP = highest number of total claims paid for, if greater than 20.   |                     |   |                      |                                  |                         |                              |                       |
| <b>Indep. Claims</b>  | <b>Extra Claims</b> | <b>Fee (\$)</b>   | <b>Fee Paid (\$)</b> |                                  |                         |                              |                       |
| 8   | - 8 =               | x   | =                    |                                  |                         |                              |                       |
| HP = highest number of independent claims paid for, if greater than 3.  |                     |   |                      |                                  |                         |                              |                       |
| <b>3. APPLICATION SIZE FEE</b>  |                     |   |                      |                                  |                         |                              |                       |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                     |   |                      |                                  |                         |                              |                       |
| <b>Total Sheets</b>   | <b>Extra Sheets</b> | <b>Number of each additional 50 or fraction thereof</b> | <b>Fee (\$)</b>      | <b>Fee Paid (\$)</b>             |                         |                              |                       |
| - 100 =   | /50 =               | (round up to a whole number) x                          | =                    |                                  |                         |                              |                       |
| <b>4. OTHER FEE(S)</b>  |                     |   |                      |                                  |                         |                              |                       |
| Non-English Specification, \$130 fee (no small entity discount)   |                     |   |                      |                                  |                         |                              |                       |
| Other (e.g., late filing surcharge): 1251 Extension for response within first month   |                     |   |                      |                                  |                         | 120.00                       |                       |


|                     |   |                                   |                  |
|---------------------|---|-----------------------------------|------------------|
| <b>SUBMITTED BY</b> |   |                                   |                  |
| Signature           |  | Registration No. (Attorney/Agent) | 40,439           |
| Name (Print/Type)   | D. Richard Anderson   | Telephone                         | (703) 205-8035   |
|                     |   | Date                              | October 25, 2007 |

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

|   |      |  |  |
|---|------|--|--|
| Effective on 12/08/2004.<br>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).<br><b>FEE TRANSMITTAL</b><br><b>For FY 2008</b> |      | <b>Complete if Known</b><br>Application Number 09/708,081-Conf. #9588<br>Filing Date November 8, 2000<br>First Named Inventor Hiroshi TANAKA<br>Examiner Name G. V. Selby<br>Art Unit 2622<br>Attorney Docket No. 0879-0286P |  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |      |  |  |
| TOTAL AMOUNT OF PAYMENT   | (\$) | 930.00   |  |

|  |  |
|--|--|
| <b>METHOD OF PAYMENT</b> (check all that apply)  |  |
| <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ |  |
| <input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: 02-2448    Deposit Account Name: Birch, Stewart, Kolasch & Birch,   |  |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)   |  |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee  |  |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments             |  |

|   |                     |   |                      |                                  |                         |                              |                       |
|---|---------------------|---|----------------------|----------------------------------|-------------------------|------------------------------|-----------------------|
| <b>FEE CALCULATION</b>  |                     |   |                      |                                  |                         |                              |                       |
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>  |                     |   |                      |                                  |                         |                              |                       |
|   | <b>FILING FEES</b>  |   | <b>SEARCH FEES</b>   |                                  | <b>EXAMINATION FEES</b> |                              |                       |
| <b>Application Type</b>   | <b>Fee (\$)</b>     | <b>Small Entity Fee (\$)</b>                            | <b>Fee (\$)</b>      | <b>Small Entity Fee (\$)</b>     | <b>Fee (\$)</b>         | <b>Small Entity Fee (\$)</b> | <b>Fees Paid (\$)</b> |
| Utility   | 310                 | 155   | 510                  | 255                              | 210                     | 105                          |                       |
| Design  | 210                 | 105   | 100                  | 50                               | 130                     | 65                           |                       |
| Plant   | 210                 | 105   | 310                  | 155                              | 160                     | 80                           |                       |
| Reissue   | 310                 | 155   | 510                  | 255                              | 620                     | 310                          |                       |
| Provisional   | 210                 | 105   | 0                    | 0                                | 0                       | 0                            |                       |
| <b>2. EXCESS CLAIM FEES</b>   |                     |   |                      |                                  |                         |                              |                       |
| <b>Fee Description</b>  | <b>Fee (\$)</b>     | <b>Small Entity Fee (\$)</b>                            |                      |                                  |                         |                              |                       |
| Each claim over 20 (including Reissues)   | 50                  | 25  |                      |                                  |                         |                              |                       |
| Each independent claim over 3 (including Reissues)  | 210                 | 105   |                      |                                  |                         |                              |                       |
| Multiple dependent claims   | 370                 | 185   |                      |                                  |                         |                              |                       |
| <b>Total Claims</b>   | <b>Extra Claims</b> | <b>Fee (\$)</b>   | <b>Fee Paid (\$)</b> | <b>Multiple Dependent Claims</b> |                         |                              |                       |
| 11  | - 20 =              | x   | =                    | <b>Fee (\$)</b>                  | <b>Fee Paid (\$)</b>    |                              |                       |
| HP = highest number of total claims paid for, if greater than 20.   |                     |   |                      |                                  |                         |                              |                       |
| <b>Indep. Claims</b>  | <b>Extra Claims</b> | <b>Fee (\$)</b>   | <b>Fee Paid (\$)</b> |                                  |                         |                              |                       |
| 8   | - 8 =               | x   | =                    |                                  |                         |                              |                       |
| HP = highest number of independent claims paid for, if greater than 3.  |                     |   |                      |                                  |                         |                              |                       |
| <b>3. APPLICATION SIZE FEE</b>  |                     |   |                      |                                  |                         |                              |                       |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                     |   |                      |                                  |                         |                              |                       |
| <b>Total Sheets</b>   | <b>Extra Sheets</b> | <b>Number of each additional 50 or fraction thereof</b> | <b>Fee (\$)</b>      | <b>Fee Paid (\$)</b>             |                         |                              |                       |
| - 100 =   | /50 =               | (round up to a whole number) x                          | =                    |                                  |                         |                              |                       |
| <b>4. OTHER FEE(S)</b>  |                     |   |                      |                                  |                         |                              |                       |
| Non-English Specification, \$130 fee (no small entity discount)   |                     |   |                      |                                  |                         |                              |                       |
| Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 ...   |                     |   |                      |                                  |                         |                              | 810.00                |
| 1251 Extension for response within first month  |                     |   |                      |                                  |                         |                              | 120.00                |

|                     |   |                                   |                  |
|---------------------|---|-----------------------------------|------------------|
| <b>SUBMITTED BY</b> |   |                                   |                  |
| Signature           |  | Registration No. (Attorney/Agent) | 40,439           |
| Name (Print/Type)   | D. Richard Anderson   | Telephone                         | (703) 205-8035   |
|                     |   | Date                              | October 25, 2007 |